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K093520

Executive Summary

JAN - 5 2010

This executive summary has been prepared in accordance with 21 CFR 807.87(h) and the 510(k) has been prepared in accordance with 21 CFR 807.92

Submitter

Michelson Diagnostics Ltd

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Contact Person

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Job Title:

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Date Summary Prepared

November 11, 2009

Device Trade Name

VivoSight Topical OCT System

Device Common Name

Multi-Beam Optical Coherence Tomography (OCT) scanner

Device Classification

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Legally Marketed devices to which the device is substantially equivalent

Imalux OCT Imaging System

Description of the

Device

Multi-Beam Optical Coherence Tomography (OCT) tissue imaging system

Intended Use of the Device

The intended use of the Michelson Diagnostics VivoSight Topical OCT System:

Intended to be used as an imaging tool in the evaluation of external human tissue microstructure by providing twodimensional, cross-sectional, real-time depth visualization

This is the same as the predicate device with the addition that it is for external tissue only





Food and Drug Administration 10903 New Hampshire Avenue Document Control Room W-O66-0609 Silver Spring, MD 20993-0002

JAN - 5 2010

Michelson Diagnostics Ltd. % Mr. Martin Johns Operations Director 11A Grays Farm Production Village Grays Farm Road, Orpington Kent BR5 3BD, United Kingdom

Re: K093520

Trade/Device Name: VivoSight Topical OCT System

Regulation Number: 21 CFR 892-1560

Regulation Name: Ultrasonic pulsed echo imaging system

Regulatory Class: Class II

Product Code: NQQ

Dated: December 16, 2009 Received: December 22, 2009

Dear Mr. Johns:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21)

CFR Part 807); labeling (21 CFR Part 801); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please go to http://www.fda.gov/AboutFDA/CentersOffices/CDRH/CDRHOffices/ucm115809.htm for the Center for Devices and Radiological Health's (CDRH's) Office of Compliance. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to http://www.fda.gov/cdrh/mdr/ for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address http://www.fda.gov/cdrh/industry/support/index.html.

Sincerely yours,

Mark N. Melkerson

Director

Division of Surgical, Orthopedic and Restorative Devices Office of Device Evaluation Center for Devices and Radiological Health

Enclosure

Indications for Use

510(k) Number (if known):

K093520

Device Name:

VivoSight Topical OCT System

(A Multi-Beam Optical Coherence Tomography (OCT)

scanner)

Indications for Use:

VivoSight is a Multi-Beam Optical Coherence Tomography (OCT) system indicated for use in the two-dimensional, cross-sectional, real-time imaging of external tissues of the human body.

Prescription Use YES (Part 21 CFR 801 Subpart D)

AND/OR

Over-The-Counter Use NO (Part 21 CFR 801 Subpart C)

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE)

(Division Sign-Off)

Division of Surgical, Orthopedic,

and Restorative Devices

510(k) Number 1693520